## PART B - FEE(S) TRANSMITTAL

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45980	hav	have its own certificate of mailing or transmission.					
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PRINCETON, 1	NJ 08543-5297						(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	2	ATTORNEY DOCKET NO		CONFIRMATION NO.
10/659,101 TITLE OF INVENTION	09/10/2003 N: ELECTRIC TOOTHB	RUSH HOUSING DESIG	John Geoffrey Chan GN		9	99047	4327
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	05/07/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	1			00,01,200,
CHIN, RANDALL E		1744	· 015-022100				
<ol> <li>Change of correspondence address or indication of "Fee Address" (3° CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 K. Bradford Adolphson  2				
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	less an assignee is ident th in 37 CFR 3.11. Comp GNEE	ified below, no assignee pletion of this form is NO	THE PATENT (print or ty data will appear on the p T a substitute for filing an (B) RESIDENCE: (CIT)	eatent. If an assign assignment.		ied below, the do	ocument has been filed for
Church & Dwight Co., Inc. Princeton, NJ							
Please check the appropri	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🗷 Co	orporation or	other private gro	up entity Government
4a. The following fee(s)  ✓ Issue Fee  ✓ Publication Fee (N  ✓ Advance Order -	No small entity discount p	<ul> <li>ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1920 (enclose an extra copy of this form).</li> </ul>					
	s SMALL ENTITY state	us. See 37 CFR 1.27.	☐ b. Applicant is no lon				
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